ACCEPTED FOR PROCESSING - 2017 December 8 9:55 AMJ - SCPSC - 2017-361-T - Page 1 of 10

	0,10108
STATE OF SOUTH CAROLINA	
)	BEFORE THE
(Caption of Case)	PUBLIC SERVICE COMMISSION
Example: Application for a Class C Charter Certificate from	OF SOUTH CAROLINA
John Doe dba Doe's Limo	
,)	TRANSPORTATION COVER SHEET
)	
	NUMBER: 2017 _ 361 _ T
)	NUMBER: 20
)	Total Control of the
)	If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you
)	have filed with the Commission before, a Docket Number was assigned
(Please type or print)	and should be entered above.
Submitted by: TITANIUM TLANS port INC	Telephone: (678) 491-9479
Address: 3076 FARCE/15 RD	Fax: (555) 265 - 9529
BRANCHVILLE, SC 29432	Other:
	Email: Timulanthans por 16@gmail. in
NOTE: The cover sheet and information contained herein neither replaces	s nor supplements the filing and service of placetimes at
as required by law. This form is required for use by the Public Service C be filled out completely.	ommission of South Carolina for the purpose of docketing and must
or fined out completely.	
NATURE OF ACTION	(Check all that apply)
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	
Application - Class C Charter	Request to Amend Scope of Authority Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus	
Application - Class C Non-Emergency	Request to Amend Passenger Limit
	Request
Application - Class C Stretcher Van	Exhibit
Application - Class E Household Goods	Late-Filed Exhibit
Application - Class E Hazardous Waste	Letter
Application	Request Exhibit Late-Filed Exhibit Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certificate	Reservation Letter
of Public Convenience and Necessity to be Rescinded	Response
Request for Cancellation of Certificate	Return to Petition
Request for Suspension	Other:
Request for Reinstatement	

Dec 07 17, 05:00p

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

Phone: (803) 896-5100

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

CLASS C - NON-EMERGENCY	Date: 12/7/17
Application is hereby made for a Certificate of Public Converse of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendment	nience and Necessity, in accordance with the provision ats thereto.
Name under which business is to be conducted (corporation, par	thership, or sole proprietorship, with or without trade name
3-76 PARREIIS RA BUNNEHU Street Address	
P.O. Box 392073, SAEIVILE Mailing Address of Applicant (if	G4 30039
(678) 491- 9479 Phone	(855) 265-5524 _
Email Ad	dress
 If the Applicant is an LLC or a corporation, a copy of the Conservation of State and the Articles of Incorporation must be a Carolina Secretary of State "Foreign Corporation" Certificate 	ttached. (If incorporated outside of SC, attach South
3. Select Entity Type: (Check one)	
☐ Individual Owner/Sole Proprietorship	
Partnership - List names and address of all person har	ving an interest in the business.
Corporation - List names and addresses of two princip	pal officers.
SEFFENSY ECUES, CEO, 3076 FAR	edls RD Brancaville St. 29432
Many Echols, CTO, 3076 FARREIT	s Ro, Bruncuvelle, SC 29437

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

Financial Statement

Applicant's assets and liabilities are as follows:

Assets:		<u>Liabilities</u>	<u>3:</u>
Value of Real Estate	Ø	Mortgage/Loan on Real Estate	Ø
Value of Motor Vehicles	\$ 20,500	Loans Owed on Motor Vehicles	\$ 29,867
Cash on Hand	\$ 500	Business/Other Loans Owed	\$ 2,956
Cash in Bank	814,402	Other Liabilities or Debts	Ø
Value of Other Assets and Equipment	F13, 375	Total Liabilities	₱32,823 ✓
Total Assets	\$48.272 /		

INSTRUCTIONS:

- 1. "Value of Real Estate" means the actual or estimated market value of any real property/buildings owned by the Company/Business Applying for a Certificate.
- 2. "Mortgage/Loan on Real Estate" means the outstanding balance on any Mortgage, Equity Line or other Loan secured by the Real Estate listed in Item 1.
- 3. "<u>Value of Motor Vehicles</u>" means the actual or fair estimated value of any moving vans, trucks or other vehicles owned by the Company/Business Applying for a Certificate.
- 4. "Loans Owed on Motor Vehicles" means the outstanding balance on any loans or liens on the vehicles listed in Item 3.
- 5. "Cash on Hand" is the total of actual cash held by the Company/Business applying for a Certificate on the day this form is filled out.
- 6. "Business/Other Loans Owed" means the outstanding balance on any small business loan or other unsecured loan made by a person, bank or business to the Business/Company applying for a Certificate.
- 7. "Cash in Bank" means the current balance in checking accounts, savings accounts or the like in the name of the Company/Business applying for a Certificate. Do not include retirement accounts or personal bank account balances.
- 8. "Value of Other Assets and Equipment" should include the actual or estimated value of items such as office equipment (computers/furnishings), moving equipment (hand trucks/blankets/strapping), and trailers.
- 9. "Other Liabilities or Debts" means specific amounts/balances which the Company/Business applying for a Certificate knows that it owes to other persons or companies; for example Franchise Fees. This does NOT include regular bills such as electricity bills, security system costs, insurance, salaries, etc.

PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges:

\$400 pen passenger, per ever Trip

Requested Scope of Authority: Check all counties in which you are requesting permission to operate. You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.

Abbeville	Cherokee	Florence	Lee	Saluda
Aiken	Chester	Georgetown	Lexington	Spartanburg
Allendale	Chesterfield	Greenville	Marion	Sumter
Anderson	Clarendon	Greenwood	Marlboro	Union
Bamberg	Colleton	Hampton	McCormick	Williamsburg
Barnwell	Darlington	Horry	Newberry	York
Beaufort	Dillon	Jasper	Oconee.	
Berkeley	Dorchester	Kershaw	i Orangeburg	X Statewide
Calhoun	Edgefield	Lancaster	Pickens	•
Charleston	Fairfield	Laurens	Richland	

DESCRIPTION OF EQUIPMENT

You are not required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped to carry is based on the number of <u>seatbelts</u> in the vehicle, including the driver's seatbelt.)

1-7 Passengers, including driver

8-15 Passengers, including driver

MAKE _	YEAR & MODEL	VIN#	EMPTY WEIGHT	WHEEL CHAIR LIFT
Dongs	2001 RAM WAGON	285WB35Z6/K535758	8,700	
OLDS	2007 RAM WAGON 2002 INTRIGUE	163W55ZHXZF129061	3,400	
	(
	+			
	<u> </u>	<u> </u>		
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Dec 07 17, 05:00p

INSURANCE QUOTE

This form MUST BE COMPLETED.

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required to purchase insurance until your application has been approved and an order has been issued by the PSC. THIS IS ONLY A QUOTE.

TITANIUM TRAN	Name of Applicant	
3076 FARSEIIS RO	BRANCHUILE, SO	c 29432
	Address of Applicant	
nount of Premium:		
e above quoted premium is for a term of		(App. C
ne above quoted premium is for a term of Minimum Limits - Bodily injury and prophan the following:	months. erty damage limits will not be i	less Limits Quoted
ne above quoted premium is for a term of Minimum Limits - Bodily injury and propulan the following: Liability Combined Each Occurance		Limits Quoted
ability Insurance \$ 6,877.00 ne above quoted premium is for a term of Minimum Limits - Bodily injury and proportion the following: Liability Combined Each Occurance Medical Payments per Person	months. erty damage limits will not be i	

I, the Applicant, am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact the Department of Motor Vehicles at (803) 896-8457 or (803) 896-9903.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

Dec 07 17, 05:01p

Exhibit Fit, Willing, and Able (FWA)

	TITANIUM	TRANSPORT	Inc
		Name)
1.	Is there currently any outstan	ding judgments against the	Applicant?
	○ Yes	l No	
	If Yes, list judgements here:		
	·		
2.	Is Applicant familiar with all carrier operations in South So statutes and regulations?	statutes and regulations, in outh Carolina, and does Ap	cluding safety regulations and governing for-hire motor plicant agree to operate in compliance with these
	Yes O	No No	
3.	Is Applicant aware of the Cortherewith?	mmission's insurance requi	rements and the insurance premium costs associated
	Yes	No	

ACCEPTED FOR PROCESSING - 2017 December 8 9:55 AM - SCPSC - 2017-361-T - Page 8 of 10

Exhibit on Driver Qualifications

1.	CPK	Cerunicate or its equit	valer	ers must possess at least a current American Red Cross Standard First Aid and t, and records that verify/record such training must be kept on file at the business within South Carolina.
	0	Yes	0	No
2.	Appli	cant understands that	driv	ers must be in compliance with all OSHA regulations.
		Yes	0	No
3.	Applie two-w	cant understands that ay radios, first-aid kit	drive ts, fi	ers must be trained in the use of all vehicle installed safety equipment such as the extinguishers, and other equipment as outlined in PSC Regulations.
	•	Yes	0	No
4.	Applic with d	ant understands that of isabilities, including v	drive whee	rs must be able to physically perform actions necessary to assist persons lchair users.
	•	Yes	0	No
5.	Applic casily :	ant understands that oldertifies the driver a	irive nd th	rs must wear a professional uniform and photo identification badge that e company for whom the driver works.
	•	Yes	0	No
	or sair.	ant understands that d ty, and records that ve s within South Caroli	:ruy/	rs must complete twelve (12) hours of in-service training annually in the area record such training must be kept on file at the company's primary place of
	•	Yes	0	No

Dec 07 17, 05:01p

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 EXECUTIVE CENTER DRIVE, SUITE 100 COLUMBIA, SOUTH CAROLINA 29210

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Volume 10, S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

S.C. Code Ann. Section 58-3-250 states, in part, that every final order of the Commission must be served by electronic service, registered or certified mail, upon the parties to the proceeding or their attorneys.

Please check the applicable box:

The Applicant AGREES to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System. The Applicant authorizes the Commission to serve its orders by using the email address as it appears on page one of this Application. To sign up for eService notifications, please visit www.psc.sc. gov to create a My DMS account.
•
•

The Applicant DOES NOT AGREE to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Applicant's Signature

Title of Applicant (e.g. President, Owner, etc.)

SWORN TO BEFORE ME
This ______ day of WECC no Dr.L. 2017

- Whit Just

MONICA GILBERT
NOTARY PUBLIC
Newton County
State of Georgia
My Comm. Expires May 14, 2018

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Authority

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

TITANIUM TRANSPORT INC,

a corporation duly organized under the laws of the state of Georgia and issued a certificate of authority to transact business in South Carolina on September 2nd, 2017, has on the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that its authority to transact business in South Carolina is subject to being revoked pursuant to S.C. Code Ann. §33-15-310, and no application for surrender of authority to do business in South Carolina has been filed in this office as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 13th day of November, 2017.

Mark Hammond, Secretary of State